

RENTAL OCCUPANCY PERMIT APPLICATION

City of Fairfax, Fire & Rescue
Office of Code Administration
10455 Armstrong St #208
Fairfax, Virginia 22030
703-385-7830 fax 703-385-9265

FEE: \$50 (Inspection fee)

Permit No. _____

Issued: _____

INSTRUCTIONS: Please print legibly in ink. Make a check payable to the City of Fairfax in the amount of \$50.00, and mail or bring the completed application and payment to the address above. A separate application is required for each rental unit. For more information or assistance call 385-7830.

RENTAL PROPERTY ADDRESS: _____ SUBDIVISION _____

NAME OF OWNER _____

OWNER ADDRESS _____

City _____ State _____ Zip _____ PHONE _____

NAME OF RENTAL/MAINTENANCE AGENT (if any) _____

ADDRESS _____ PHONE _____

CERTIFICATE

I (owner/agent) certify that the property will be rented only for occupancy by a "family unit" as defined by the Zoning Ordinance of the City of Fairfax, Virginia, Section 110-4. I further certify that I have read and understand the attached Manual for Rental Property Owners and that the property complies with all applicable State and local regulations, including the Building Code, Fire Prevention Code, Health, Safety and Sanitation Ordinance, Housing Standards, and Zoning Ordinance. I understand that the code official shall inspect the dwelling unit, grounds, and accessory structures: 1) following application; 2) every four years if there has been no intervening inspection; and 3) as response to a valid complaint. I understand that the rental property occupancy permit may be revoked if the property does not comply with the applicable codes.

Signature of Property Owner/Agent

Date

Office Use Only

Receipt No. _____

Date: _____ Initials _____

Approved by:
